

Department of Correction Responses to Questions Posed by the Appropriations Committee in advance of the August 3, 2020 Appropriations Committee Hearing.

Update on DOC's Response to the COVID-19 Pandemic:

Q: Number of inmates and staff infected with COVID.

A: The mandatory testing of DOC Staff began on Friday, July 17 at the Cheshire and Garner Correctional Institutions. Testing has since been performed at the following facilities: the Corrigan-Radgowski and Hartford Correctional Centers; as well as the Garner, MacDougall-Walker, Osborn, Robinson, and York Correctional Institutions.

So far for the second round of testing a total of 2,538 staff members have been tested, with only three asymptomatic positive results – a .1% positivity rate. In all, 386 staff members have contracted the virus; while 378 have recovered.

With regard to the offender population, the second round of testing began on Thursday, July 23, at the Robinson Correctional Institution. A total of 617 offenders were tested at the Robinson facility with 562 individuals testing negative, and 55 testing as asymptomatic positives – for a 9% positivity rate. The offenders who tested positive are being isolated and monitored to insure they do not develop any symptoms associated with the novel coronavirus.

Q: Have the numbers been decreasing?

A: Yes, the numbers are decreasing. For example, the 1st round of inmate testing at Carl Robinson resulted in 169 asymptomatic positive inmates and this round 55.

Regarding staff, as above, we have only received 3 asymptomatic positive results as we begin this round of mandatory testing.

Q: Does DOC have enough PPE? If not, what is the agency missing?

A: The agency has made a concerted effort to put in place and to maintain a 90-day supply of critical PPE and critical cleaning and hygiene supplies.

The agency has been thus far successful in establishing this 90-day supply. We maintain this supply in a separate warehouse from our daily use supplies.

The agency continues to source and procure PPE and other needed supplies from the marketplace and from the EOC warehouse to meet its ongoing daily usage requirements and are currently not having any significant difficulties in meeting our needs.

As of now we are not seeing a disruption in our various supply chains, however we are cognizant of what is occurring nationally and internationally with regard to the surging demand for PPE and are monitoring the situation closely.

Q: How has COVID affected overtime costs?

A: At the beginning of Fiscal Year 2020, the agency made a commitment to the legislature and OPM to reduce our overtime by 5% from the agency's Fiscal Year 2019 levels. Prior

to the escalation of the COVID-19 pandemic in Connecticut, the DOC was on track to achieving this reduction. Beginning mid-March, overtime usage for the department increased dramatically when compared to the average of the first 21 pay periods of the fiscal year. The last 5 pay periods of the year showed an increase of 87,061 hours over the previous average. At the average CO overtime hourly rate of \$43.17, this is an increase of \$3.75 million over initial estimates. As the transmission rates in the state and within our facilities has waned so has the level of overtime. We are currently approaching our “normal” seasonal levels.

Surprisingly, the increase in Inmate Medical Services overtime during this period was nominal (it was only slightly higher than what their usages has been through most of FY20).

Q: The ACLU and the state of CT settled a federal lawsuit brought on behalf of medically fragile inmates. The agreement required various hygiene and sanitation practices as well as to prioritize this population for release programs. Have these changes been implemented yet? If so, to what degree?

A: The ACLU settlement agreement was approved by Judge Arterton on Monday July 23, 2020 following a fairness hearing. The provisions on hygiene and sanitation and releases have already been fully implemented by the Department.

Update on HEP C testing:

Q: How has COVID affected this?

A: At the peak of the pandemic impact on our facilities, the agency’s HCV efforts did slow a bit, however testing and treatment has continued. To date we have tested the entire systems population and testing has shifted to primarily focus on intake facilities.

- Inmates offered testing – 14,236
- Inmates tested – 11, 502
- Compliance rate – 81%
- Positivity rate – 8%

To date the agency has tested 11,502 inmates and treated 333 inmates for HCV and there are currently 96 inmates undergoing treatment. DOC expended approximately \$6.8 million on testing and treating HCV in FY20. The agency had anticipated spending more, however, as previously mentioned, our HCV efforts were hampered by the COVID-19 pandemic and the need to focus our efforts on dealing with the presence of the COVID-19 virus in our facilities. As the COVID-19 situation in our facilities has become, at this time, more manageable, we are once again able to provide more focus on this effort.

Update on Inmate Medical Services:

Q: How has hiring medical staff been going?

A: The agency’s health services staffing efforts continue to progress well. The agency continues to experience issues with compensation and labor supply, however we continue to achieve net gains in our health services staffing complement.

Q: How many open medical positions are there?

A: DOC has hired 184 people in health services since January 2019. Separations, however continue to offset gains. There have been 89 separations in the current year as compared to 69 separations a year ago. Despite this up and down staffing situation, DOC continues to achieve net gains in its overall Health Services staffing complement.

The Health Services staff headcount is 7.3% higher now than a year ago. This represents a net increase of 78 staff since January 2019. There are 108 health services positions at various stages of the staffing process currently.

Update on Facilities:

Q: With the decline in inmate population (decreased over 2,000 inmates since March 1st) does the agency advise closing any additional facilities or units?

A: With the decline in the inmate population there is potential for the closure of a DOC facility and/or the closure of housing units within a DOC facility. We are closely monitoring our intake rate and the sentencing rate as we believe that some of the slowdown in these rates is due to the COVID-19 pandemic. We are evaluating potential closure options and believe that there is real potential for a closure at some point during the new fiscal year, however the closure of a facility and/or individual housing units within a facility is highly dependent upon intake and sentencing rates as well as the impact of the current pandemic on DOC operational considerations. Please note that savings that accrue from the closure of a facility and/or individual housing units within a facility do not occur instantaneously. Savings accrue over time as overtime costs are reduced throughout the agency as staff from the shuttered facility and/or housing units are redeployed to other facilities. It is also important to take into consideration that shuttered facilities and/or housing units still have carrying costs as these facilities/housing units must still be maintained, (minimally) heated and secured.

- The agency strongly recommends that any facility or unit closures wait until April 2021. The agency is currently in the final stages of completing its Operational plans for a second wave of COVID for this fall 2020. The current extra/empty bed space will allow the agency to spread out the offender population in order to maintain necessary and appropriate social distancing throughout our correctional facilities.